



PROGRAM REGISTRATION FORM

44345 W Martin Luther King Jr. Blvd., Maricopa, AZ 85138

P: (520) 316-4600 | www.coppersky.maricopa-az.gov

A Multigenerational Recreation Center (the "Facility") Operated by the City of Maricopa, Arizona (the "City")

Adult/Participant Guardian Contact: _____

Address: _____
(Street Address) (City) (Zip Code)

Phone: Home _____ Cell _____ Work _____

E-mail: _____

DOB: _____

☐ Resident ☐ Non-Resident

☐ New Account ☐ Information Change

First	NAME Last	SEX (circle)	AGE	DOB	CLASS TITLE	START DATE	DAY(S) OF CLASS
		M / F					
		M / F					
		M / F					
		M / F					
		M / F					
		M / F					

Emergency Contact: _____

Address: _____
(Street Address) (City) (Zip Code)

Phone: Home _____ Cell _____ Work _____

E-mail: _____

Emergency Contact DOB: _____

Payment Method: ☐ Cash ☐ Check # _____ ☐ Visa ☐ MasterCard ☐ Discover ☐ AMEX

Program Fee: _____

Receipt Number: _____

***Please note there is a convenience fee for all online transactions. The fee is a percentage of your total transaction amount.
This fee is **non-refundable*****

Registration Form Agreement:

To the extent allowed by law, I hereby absolve the City of Maricopa, its employees, agents, independent contractors, and officers from all liability which may arise as the result of my/our participation in activities I or any member of my family attends or registers into; and in the event that the above participant(s) is a minor, I hereby give my permission for his or her participation as indicated and in doing so absolve the City of Maricopa, its employees, agents, independent contractors, and officers from such liability. I am aware that if I have registered for a class involving physical activity, I have taken care to enroll at a class level appropriate to my/our physical abilities and/or medical condition. I release use of my/our photos taken during program participation from all and any claims and demands resulting from their use in program publicity.

A signature is required by each adult registering on this form. One participant/guardian may sign for all minors on this account.

Signature: _____ **Date:** _____



PROGRAM REGISTRATION FORM – Current Account Holders

44345 W Martin Luther King Jr. Blvd., Maricopa, AZ 85138

P: (520) 316-4600 | www.copperskyrecreation.com

A Multigenerational Recreation Center (the "Facility") Operated by the City of Maricopa, Arizona (the "City")

Date: _____

First	NAME Last	SEX (circle)	AGE	DOB	CLASS TITLE	START DATE	DAY(S) OF CLASS
		M / F					
		M / F					
		M / F					
		M / F					
		M / F					
		M / F					

Payment Method: ☐ Cash ☐ Check # _____ ☐ Visa ☐ MasterCard ☐ Discover ☐ AMEX

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Signature: _____ Date: _____